

Memorandum

DATE: December 15, 2020
TO: All Part-time Instructors and Non-instructional Faculty
FROM: Reed Rawlinson, Benefit Analyst
SUBJECT: Spring Open Enrollment for Medical, Dental, and Vision Coverage. Eligible part-time instructors and non-instructional faculty members may enroll in Kaiser HMO, Anthem EPO, Delta Dental PPO, Delta Care, and the Vision Services Plan during the open enrollment periods shown in the tables below.

SPRING OPEN ENROLLMENT	January 11, 2021 to January 29, 2021
Coverage Period	February 1, 2021 to August 31, 2021
Enrollment Documents Received	By Friday, January 22, 2021
Payroll Deductions	February through June (5 months)
Enrollment Documents Received	By Friday, January 29, 2021
Payroll Deductions	March through June (4 months)

Eligibility requirements: Part-time faculty members must be employed in the current semester and have averaged at least 0.3 load (FTE) of a regular faculty member's load for the previous academic year excluding summer (e.g., Fall 2019 and Spring 2020).

Premium Contributions: Premium contributions are based on the faculty member's *average load for the previous academic year excluding summer* (e.g., Fall 2019 and Spring 2020). Contributions are shown below in three tiers for medical and dental coverage. Part-time Instructors pay the full premium for the Vision Services Plan.

- Average 30-39% load (FTE) – District shall contribute 40% of the premium cost
- Average 40-59% load (FTE) – District shall contribute 50% of the premium cost
- Average 60% load (FTE) and greater – District shall contribute 75% of the premium cost

NO NEED TO CONFIRM: If you are already enrolled in health coverage at CCCCD, there is no need to re-enroll.

Enrollment Form: Adjunct faculty must use the Universal Benefit Enrollment Form ADJUNCT to enroll. Find this form at the District Office website at www.4cd.edu select "Human Resources," "Benefits" and "Part-time Instructors." **Please Note:** Copies of marriage license or District Affidavit of Domestic Partnership and copies of birth certificates for dependent children are required and must be submitted with the enrollment form.

Deleting Coverage: The deleting coverage form must be used to discontinue coverage. Find this form as noted above.

Important Documents: Important documents including premium rates may be found at the website as noted above.

Send Enrollment/Deleting Coverage Forms to: Reed Rawlinson by email at rrawlinson@4cd.edu or to 500 Court St, Martinez, CA 94553.